

# COSMEDICS AUSTRALIA LIMITED

ABN 38 002 862 017

Please return this form to:  
Cosmedics Australia Limited Share Registry  
C/- Link Market Services Limited  
GPO Box 2537  
Brisbane QLD 4001  
Telephone: (02) 8280 7454  
Facsimile: (02) 9287 0303  
Email: registrars@linkmarketservices.com.au  
Website: www.linkmarketservices.com.au

NAME  
ADDRESS1  
ADDRESS2  
ADDRESS3  
ADDRESS4  
ADDRESS5

\*Barcode\*

Security Reference Number (SRN):  
XXXXXXXXXXXX

## EXERCISE OF CMAO OPTIONS AT \$0.1333 EXPIRING 31 DECEMBER 2005

Options held at XX/XX/XXXX	Exercise Price of \$0.1333 Per option	Amount payable
XX,XXX	x AUD \$0.1333	\$XX,XXX.XX

**IMPORTANT NOTICE:** The Options referred to in this Option Exercise Form may be transferred electronically in CHESS. This Option Exercise Form should not be relied on as evidence of the current entitlement of the person named in this Option Exercise Form.

**LAST DAY OF OPTIONS TRADING 21<sup>st</sup> DECEMBER 2005**

**Options Expire 30 December 2005**

To be completed by Optionholders	Number of options to be exercised	Exercise price of \$0.1333 Per option	Amount payable
		x AUD \$0.1333	

Return of this form with your cheque on or before the close of business on 30 December 2005 will constitute acceptance of your exercise of options and will constitute your agreement to be bound by the Constitution of Cosmedics Australia Limited. **As the expiry date falls on a non-business day, it has been determined by the NSX that the close date will be 30 December 2005.**

Each option entitles the holder to one fully paid share in the capital of Cosmedics Australia Limited ABN 38 002 862 017 ("the Company").

### Payment Details

- All cheques are to be made payable to "**Cosmedics Australia Limited**" and crossed "not negotiable". All cheques are to be drawn in Australian currency from an Australian Bank.
- The exercise notice together with your payment should be forwarded to Cosmedics Australia Limited, C/- Link Market Services Limited, GPO Box 2537, Brisbane QLD 4001.

Cheque or Money Order Number

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BSB Number

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Account Number

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Cheque Drawer

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Cheque (or money order) amount must correspond with the amount above.

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Please provide a daytime telephone number where we can contact you if we have any questions about this application.

Contact Name (PRINT)

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Daytime telephone number

(		)																	
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### NO SIGNATURES ARE REQUIRED ON THIS FORM

If you require further information on how to complete this Application Form please contact the Share Registrar on 02 8280 7454 if calling within Australia, or +61 2 8280 7454 if calling from outside Australia.

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